

RECEIVED CENTRAL FAX CENTER OCT 0 8 2008

Fax

Attention:	Attn: Group Art Unit 1795	From:	Travis Dodd
Fax:	571-273-8300	Fax:	818-833-2065
Phone:		Phone:	818-833-2014
Company:	U.S. Patent and Trademark Office	Company:	Quallion LLC
		Pages:	Total of (21) Pages
Re:	Application Serial No.: 10/810,081 Title: ELECROLYTE INCLUDING POLYSILOXANE WITH CYCLIC CARBONATE GROUPS Filed: March 25, 2004 Examiner: BEST, Zachary Group Art Unit: 1795 Attorney Docket No.: Q199-US1	Date:	October 8, 2008
□ Ųrgen	t Ø For Review 🗆 Please Co	mment Ø Ple	ase Reply D Please Recycle

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office, Fax No. <u>703-273-8300</u> on <u>October 8, 2008</u>:

Amendment Transmittal Letter (1 page) Fee Transmittal (1 page) Amendment (18 pages)

Lisa K. Robbins

(Name of Person Signing Certificate)

(Signature)

Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 633-2000 • FAX: (818) 633-2065

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→ PTO

 	UCI 082
 Application Number	10/810,081
	14 1 22 222

TRANSMITTAL
FORM
(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Filing Date
Filing Date
March 26, 2004
First Named Inventor
Robert West et al.

Group Art Unit
1795
Examiner Name
BEST, Zachary
Attorney Docket Number
Q199-US1

EN	CLOSUF	RES (check all that apply)				
x Fee Transmittal Form		Assignment Papers (for an Application)	After Allowance Communication to Group			
χ Fee Authorizad		Drawing(s)	Appeal Communication to Board of Appeals and Interferences			
X Amendment		Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
X Amendment		Petition to Covert to a Provisional Application	Proprietary Information			
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address	Status Letter			
Extension of Time Request		Terminal Disclaimer	Other Enclosure(s) (please identify below):			
Express Abandonment Request		Request for Refund				
Information Disclosure Statement		CD, Number of CD(s)				
,	Remarks	. 150				
Certified Copy of Priority Document(s)			 			
Response to Missing Parts/ Incomplete Application		·				
Response to Missing Parts under 37 CFR 1.52 or 1.53						
Customer Number or Bar Code Label	31815 (Insert Cu	stomer No. or Attach bar code label here)				
6						
The Commissioner is hereby authorized to charge No. 50-0921. Adupticate copy of this sheet is end-		al fees which may be required, or credit any	overpayment to Deposit Account			
·	Respectfully submitted,					
\sim						
Dated: 10/08/2008	Dated: 10/08/2008 By:					
Phone: (818) 833-2003		Travis Dodd				
Fax: (818) 833-2065		Attorneys for Applicant(s P.O. Box 923127	§)			
		Sylmar, CA 91392-3127				

CERTIFICATE OF MAILING							
máil	his correspondence is being deposited essed to: Commissioner of Patents at	•		·	age as first class		
Typed or printed name	TRAVIS DODD						
Signature		t	Date				

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FEE TRANSMITTAL

Attorney Docket No.	Q199-USI	
First Named Inventor:	WEST, Robert et al.	
Application Number	10/810,081	
Filing Date:	March 25, 2004	
Examiner Name:	1795	
Group/Art Unit:	Best, Zachary	

TOTAL AMOUNT OF PAYMENT:	\$.00
METHOD OF PAYMENT (check One)	The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:
	Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC
	X. Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
	2 Fayment Enclosed: Check Moncy Order Other - Credit Card

2. UTILITY Basic Filing Fee & Claims

(I) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	xx	xx	\$330.00	\$165.00	s.00
Total Claims	59 - 65=	0	X \$52.00	X \$26.00	\$.00
Independent Claims	4 - 8 =	0	X \$220.00	X \$110.00	\$.00
Multiple Dependent Cla	im(s) (if applicable)	\$390.00	\$195.00	\$.00
Total of above Calculations =					\$.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$220.00	\$110.00	\$.00
Reissue filing fee	\$330.00	\$165.00	\$.00
Provisional filing fee	\$220.00	\$110.00	\$.00
	Total of ab	ove Calculations =	\$.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	S	S
r	\$	·S	S
	\$	\$	\$
	S	S	S
•		TOTAL:	\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)		42,491
Signature .		Date	10/08/	2008

Ø 004/021

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

ROBERT C. WEST

Examiner:

Best, Zachary P.

Serial No.:

10/810,081

Art Unit:

1795

Filed: March 25, 2004

For: ELECTROLYTE INCLUDING

POLYSILOXANE WITH CYCLIC

CARBONATE GROUPS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT AND REQUEST FOR RECONSIDERATION

This communication is in response to the Office Action mailed July 9, 2008.